## **FEC FORM 9**

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

| . Individual, Organization or Qualified Nonpro   | off Corporation Making th          | ne Dishursement/Obligations                            |
|--|------------------------------------|--|
| (a) Name   | on Corporation making bi           | ie Dispursementoopiigations                            |
| Working for Working Americans  |                                    |  |
|  | than previously reported           | 2. FEC Identification Number                           |
| 6801 Placid Street   |                                    | 2. FEC Identification Number                           |
| (c) City, State and ZIP Code   |                                    | C second second control of the second second           |
| Las Vegas, NV 89119  |                                    |  |
| (d) Name of Employer or Principal Place of Business  | . (0                               | e) Occupation  |
| N/A  |                                    | N/A  |
| New or Amended   | 4. Covering Period                 | 1 0 1 2 2 0 0 7<br>through                             |
| † Amended  |                                    | 12 13 2007   |
| i. (a) Date of Public Distribution(s) 1 2 1 3  | 2 0 0 7 (b) Comm                   | nunication Title <u>"Tax Breaks"</u>                   |
| i. Is the Filer a Qualified Nonprofit Corporation  | on under 11 CFR 114.10?            | Yes 🤃 No 💢   |
| <ol> <li>Were the disbursements for the electioneer<br/>from donations to a segregated bank according.</li> </ol>                              |                                    | e exclusively Yes E No X                               |
| . Custodian of Records   |                                    |  |
| (a) Name   |                                    |  |
| Loreen Ziska   |                                    |  |
| (b) Address (number and street)  |                                    |  |
| 6801 Placid Street   |                                    |  |
| (c) City. State and ZIP Code   |                                    |  |
| Las Vegas, NV 89119  |                                    |  |
| (d) Name of Employer or Principal Place of Business  | •                                  | e) Occupation  |
| United Brotherhood of Carpenters and J   | loiners                            | Comptroller  |
|  | وين دور برد رده ا                  | Secretary Manager Street, The market and the secretary |
| . Total Donations This Statement   | van de servi                       | . i.5. 2, 3±0 <u>.4</u> 0 ± 9 . 9                      |
| D. Total Disbursements/Obligations This State  | ment                               | 4 8 2 2 5 0 0 0  |
| Under penalty of perjury, I certify that this statement is communications reported herein were made by a counder the Commission's regulations. | rporation, I certify that the corp |  |
| TYPE OR PRINT NAME OF PERSON COMPLETING FOR  | RM William Luddy                   |  |
| 1111-11  |                                    |  |
| SIGNATURE William  | <u> </u>                           | DATE 12/14/2007  |

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